

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Quach et al.

Application No.: 09/676,311

Filed: September 30, 2000

For: ERROR RECOVERY FOR
SPECULATIVE MEMORY
ACCESSES

Examiner: Not assigned

Art Group: 2183

*RECEIVED
MAR 27 2001
Technology Center 2100*

REQUEST FOR CORRECTION OF FILING RECEIPT

Assistant Commissioner for Patents and Trademarks
Washington, D.C. 20231

Dear Sir:

We have received the Filing Receipt for the above-identified U.S. Patent Application (copy enclosed). Upon our review, we have discovered that the U.S. Patent and Trademark Office made a typographical error regarding the filing date. The Filing Receipt indicates the date of filing as:

"9/29/00"

The filing date should be corrected as follows:

"9/30/00"

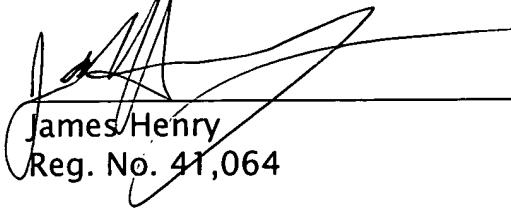
Please correct your records to reflect the correct filing date, and send us

a corrected Filing Receipt. A copy of our Express Mail receipt is also enclosed.

If there are any questions regarding this application, please contact the undersigned.

Respectfully submitted,

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP


James Henry
Reg. No. 41,064

Date: January 3, 2001

12400 Wilshire Boulevard, Seventh
Floor
Los Angeles, California 90025
(714) 557-3800

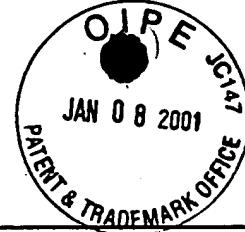
CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on: January 3, 2001.


Pat Sullivan January 3, 2001
Pat Sullivan



UNITED STATES PATENT AND TRADEMARK OFFICE



Page 1 of 3

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UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY.DOCKET.NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/676,311	09/29/2000	2183	768	042390.P5727	2	20	4

FILING RECEIPT

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
12400 Wilshire Boulevard, Seventh Floor
Los Angeles, CA 90025

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DEC 28 2000

Date Mailed: 12/15/2000

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN
LOS ANGELES

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Nhon Toai Quach, Santa Clara, CA ;
Len Schultz, San Jose, CA ;

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JAN 02 2001
BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP
COSTA MESA

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DEC 29 2000

Continuing Data as Claimed by Applicant

Foreign Applications

If Required, Foreign Filing License Granted 12/14/2000

B.S.T.Z. DATABASE DEPT.
Je.

ENTERED
12/29/2000

Title

Error recovery for speculative memory accesses

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Preliminary Class

712

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Technology Center 2100

Data entry by : TSIGE, WUBALEM

Team : OIPE

Date: 12/15/2000



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DEC 28 2000
STATUS DB-LA



Express Mail Deposit Request

Client Number 042390

Matter Number P5727

Client Name Intel Corporation

Matter Title ERROR RECOVERY FOR SPECULATIVE MEMORY
ACCESSES- UTILITY

Item New Patent Application

Remarks

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Express Mail # EL466331030US

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Date Entered: 10/02/00

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Name of Person Depositing EM Envelope: Pat Sullivan

Date Deposited: 09/30/00

Time Deposited: 3:22 PM

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PO ZIP Code: 92799 Date In: 9/30/00 Time In: 1522 Weight: 1.3 lbs.		Day of Delivery: <input type="checkbox"/> Next <input type="checkbox"/> Second	Flat Rate Envelope: <input type="checkbox"/> Postage : <input type="checkbox"/> 2 Noont <input checked="" type="checkbox"/> 3 PM	Return Receipt Fee : <input type="checkbox"/> COD Fee : <input type="checkbox"/> Insurance Fee : <input type="checkbox"/>
No Delivery: <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday		Accepted by Clerk Initials: PHS	Total Postage & Fees : \$ 13.5	SEE REVERSE SIDE FOR SERVICE GUARANTEE AND LIMITS ON INSURANCE COVERAGE
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 WASHINGTON, D.C. 20231
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Bib Data Sheet

SERIAL NUMBER 09/676,311	FILING DATE 09/30/2000 RULE	CLASS 712	GROUP ART UNIT 2183	ATTORNEY DOCKET NO. 042390.P5727
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APPLICANTS

Nhon Toai Quach, Santa Clara, CA ;
 Len Schultz, San Jose, CA ;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE
GRANTED ** 12/14/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 2	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials			

ADDRESS

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
 12400 Wilshire Boulevard, Seventh Floor
 Los Angeles, CA 90025

TITLE

Error recovery for speculative memory accesses

FILING FEE RECEIVED 898	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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1.1 copy Receipt

PTO/SB/21 (12/97)

Approved for use through 9/30/2000. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM		Application No.	09/676,311
		Filing Date	September 30, 2000
		First Named Inventor	Nhon Toai Quach
		Group Art Unit	2183
		Examiner Name	
Total Number of Pages in This Submission	7	Attorney Docket Number	42390P5727

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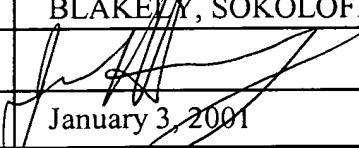
MAR 2 2001

Technology Center 2100

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; min-height: 40px;"> Request for Correction of Filing Receipt; copy of Express Mail receipt; copy of Filing Receipt </div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	James Henry, Reg. No. 41,064 BLAKE, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	January 3, 2001

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class mail with sufficient postage in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on:

January 3, 2001

Typed or printed name	Pat Sullivan		
Signature			
	Date	January 3, 2001	

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FEE TRANSMITTAL
for FY 2000

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$)

Complete if Known

Application No.	09/676,311
Filing Date	September 30, 2000
First Named Inventor	Nhon Toai Quach
Examiner Name	
Group/Art Unit	2183
Attorney Docket Number	42390P5727

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Technology Cert. 3180

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number

Deposit Account Name

Charge Any Additional Fee(s) Required
Under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

Applicant claims small entity status.
See 37 CFR 1.27.

2. Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	<input type="text"/>
106	320	206	160	Design filing fee	<input type="text"/>
107	490	207	245	Plant filing fee	<input type="text"/>
108	710	208	355	Reissue filing fee	<input type="text"/>
114	150	214	75	Provisional filing fee	<input type="text"/>

SUBTOTAL (1) 2. EXTRA CLAIM FEES

Total Claims	Independent Claims	Extra Claims	Fee from below	Fee Paid
<input type="text"/>				
<input type="text"/>				
Multiple Dependent				

*or number previously paid, if greater. For Reissues, see below

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	260	204	135	Multiple Dependent claim, if not paid
109	80	209	40	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) 3. ADDITIONAL FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	<input type="text"/>
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	<input type="text"/>
139	130	139	130	Non-English specification	<input type="text"/>
147	2,520	147	2,520	For filing a request for reexamination	<input type="text"/>
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	<input type="text"/>
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	<input type="text"/>
115	110	215	55	Extension for response within first month	<input type="text"/>
116	390	216	195	Extension for response within second month	<input type="text"/>
117	890	217	445	Extension for response within third month	<input type="text"/>
118	1,390	218	695	Extension for response within fourth month	<input type="text"/>
128	1,890	228	945	Extension for response within fifth month	<input type="text"/>
119	310	219	155	Notice of Appeal	<input type="text"/>
120	310	220	155	Filing a brief in support of an appeal	<input type="text"/>
121	270	221	135	Request for oral hearing	<input type="text"/>
138	1,510	138	1,510	Petition to institute a public use proceeding	<input type="text"/>
140	110	240	55	Petition to revive - unavoidable	<input type="text"/>
141	1,240	241	620	Petition to revive - unintentional	<input type="text"/>
142	1,240	242	620	Utility issue fee (or reissue)	<input type="text"/>
143	440	243	220	Design issue fee	<input type="text"/>
144	600	244	300	Plant issue fee	<input type="text"/>
122	130	122	130	Petitions to the Commissioner	<input type="text"/>
123	50	123	50	Petitions related to provisional applications	<input type="text"/>
126	180	126	180	Submission of Information Disclosure Stmt	<input type="text"/>
581	40	581	40	Recording each patent assignment per property (times number of properties)	<input type="text"/>
146	710	246	355	Filing a submission after final rejection (37 CFR 1.129(a))	<input type="text"/>
149	710	249	355	For each additional invention to be examined (37 CFR 1.129(b))	<input type="text"/>
179	710	279	355	Request for Continued Examination (RCE)	<input type="text"/>
169	900	169	900	Request for expedited examination of a design application	<input type="text"/>

Other fee (specify) _____

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) Complete (if applicable)

Name (Print/Type)	James Henry	Registration No. (Attorney/Agent)	41,064	Telephone	(714) 557-3800
Signature					Date

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